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| Fill in this information to identify your case: | | | | | |
|---|--|--|--|--|--|
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | | | |
| Case number (if known): | Chapter you are filing under: ✓ Chapter 7 ─ Chapter 11 ─ Chapter 12 ─ Chapter 13 | | | | |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|--|---|
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, | Damian First Name | First Name |
| | your driver's license or passport). | Middle Name | Middle Name |
| | | Lopez | |
| | Bring your picture identification to your meeting | Last Name | Last Name |
| | with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last 8 years | First Name | First Name |
| | Include your married or | Middle Name | Middle Name |
| | maiden names. | Last Name | Last Name |
| 3. | Only the last 4 digits of your Social Security | xxx - xx - <u>9</u> <u>5</u> <u>1</u> <u>2</u> | xxx - xx |
| | number or federal Individual Taxpayer | OR | OR |
| | Identification number (ITIN) | 9xx - xx | 9xx - xx |

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| Del | otor 1 Damian Lopez | Ca | ase number (if known) | |
|-----------|--|---|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 4. | Any business names and Employer Identification Numbers | ✓ I have not used any business names or EINs. | ☐ I have not used any business names or EINs. | |
| | (EIN) you have used in the last 8 years | Business name | Business name | |
| | Include trade names and doing business as names | Business name Business name | Business name Business name | |
| | | | | |
| 5. | Where you live | EIN | EIN — — — — — — — — — — — — — — If Debtor 2 lives at a different address: | |
| J. | Where you live | 39243 N. Queensbury Lane | | |
| | | Number Street | Number Street | |
| | | Beach Park IL 60083 | | |
| | | City State ZIP Code | City State ZIP Code | |
| | | Lake County | County | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. | |
| | | Number Street | Number Street | |
| | | P.O. Box | P.O. Box | |
| | | City State ZIP Code | City State ZIP Code | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | |
| | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) | |

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| Deb | otor 1 Damian Lope: | 2 | | Cas | e numbe | r (if known) | | |
|-----|--|---------------------|---|---|--------------------------------------|---|--|--|
| P | art 2: Tell the Co | urt About You | ır Bankruptcy Cas | e | | | | |
| 7. | The chapter of the Bankruptcy Code you | Check o | | tion of each, see Notice | | | C. § 342(b) for Individuals Filiopropriate box. | |
| are | are choosing to file under | ☑ Cha | apter 7 | | | | | |
| | | _ | apter 11 | | | | | |
| | | Cha | apter 12 | | | | | |
| | | ☐ Cha | apter 13 | | | | | |
| 8. | How you will pay the fe | cou pay | rt for more details abou | t how you may pay. Ty eck, or money order. I | ypically, i f your att | f you are pay orney is subr | e clerk's office in your local ing the fee yourself, you may nitting your payment on your ited address. | |
| | | | eed to pay the fee in installments. If you choose this option, sign and attach the Application for dividuals to Pay Your Filing Fee in Installments (Official Form 103A). | | | | | |
| | | By l thai fee | law, a judge may, but is n 150% of the official po | not required to, waive overty line that applies choose this option, you | your fee to your fa u must fil | , and may do amily size and I out the App | you are filing for Chapter 7. so only if your income is less d you are unable to pay the lication to Have the Chapter 7 | |
| 9. | Have you filed for | ☑ No | | | | | | |
| | bankruptcy within the last 8 years? | ☐ Yes | S. | | | | | |
| | • | District | | \ | When | 1 / DD / YYYY | Case number | |
| | | District | | | | | Case number | |
| | | Diomot . | | | MM | 1 / DD / YYYY | Case number | |
| | | District | | \ | When | 1 / DD / YYYY | Case number | |
| 10. | Are any bankruptcy | ☑ No | | | | | | |
| | cases pending or being filed by a spouse who i | | S. | | | | | |
| | not filing this case with | | | | | Relationsh | ip to you | |
| | you, or by a business partner, or by an | District | | | When | _ | Case number, | |
| | affiliate? | • | | | MM | I / DD / YYYY | if known | |
| | | Debtor | | | | Relationsh | ip to you | |
| | | District | | | When | | Case number, | |
| | | | | _ | MM | I / DD / YYYY | if known | |
| 11. | Do you rent your residence? | ☐ No. ☑ Yes | | otained an eviction jud | gment ag | ainst you and | d do you want to stay in your | |
| | | | _ | | | n Judgment / | Against You (Form 101A) | |

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| Deb | tor 1 | Damian Lopez | | | | Case number (| if known) | | | |
|--|--|--|------------|-------------------|--|---|-------------------------------|----------------------------|----------------------------------|--|
| Pa | art 3: | Report About An | ıy Bı | ısine | sses You Own as | a Sole Proprietor | | | | |
| 12. | - | u a sole proprietor full- or part-time ss? | | | Go to Part 4. Name and location of b | usiness | | | | |
| | busines | oroprietorship is a s you operate as an al, and is not a | | | Name of business, if any | | | | | |
| | separat | e legal entity such as ration, partnership, or | | | Number Street | | | | | |
| | sole pro | ave more than one oprietorship, use a | | | City | | State | ZIP Co | ode | |
| separate sheet and attach it to this petition. | | | | | Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above | | | | | |
| 13. | 3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | | can mos | set ap st rece | propriate deadlines. If nt balance sheet, staten | the court must know whether you indicate that you are a smanent of operations, cash-flow state exist, follow the procedure in | II business d atement, and | ebtor, you I federal in | must attach your come tax return | |
| | | | | No. | I am not filing under C | hapter 11. | | | | |
| | | efinition of small as debtor, see | | No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the defir the Bankruptcy Code. | | | | | |
| | 11 U.S. | C. § 101(51D). | | Yes. | I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| Pa | art 4: | Report If You Ov | vn oı | r Hav | e Any Hazardous I | Property or Any Property | y That Nee | eds Imm | nediate Attention | |
| 14. | 4. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable | | | No Yes. | What is the hazard? | | | | | |
| hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | | If immediate attention | is needed, why is it needed? | | | | |
| | | | | | Where is the property | ? Number Street | | | | |
| | | | | | | City | | State | ZIP Code | |

| Debtor 1 | Damian Lopez | Case number (if known) | |
|----------|--------------|------------------------|--|
| | | | |

15. Tell the court whether you have received

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

briefing about

counseling.

credit

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Explain Your Efforts to Receive a Briefing About Credit Counseling

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| П | I am not required to receive a briefing | g about |
|---|---|---------|
| | credit counseling because of: | |

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

rational decisions about finances.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Woluntary Petition for Individuals Filing for Bankruptcy

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

 □ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Debtor 1 | | Damian Lopez | | Case number (if known) | | | | | | | |
|-------------------------------------|--|---|--------|---|--------------------|-------------|--|--------|--|--|--|
| P | art 6: | Answer These C | luesti | ons for Rep | orting Purpo | os | es | | | | |
| 16. What kind of debts do you have? | | | | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. | | | | | | | |
| | | | 16b. | money for a l | - | | ness debts? Business debte ment or through the operation | | debts that you incurred to obtain e business or investment. | | |
| | | | 16c. | State the type | e of debts you o | we | that are not consumer or bus | siness | s debts. | | |
| 17. | Are you | u filing under er 7? | | No. I am not | t filing under Cha | apt | er 7. Go to line 18. | | | | |
| | any exc exclude admini are pai availab | estimate that after empt property is ed and strative expenses d that funds will be ale for distribution ecured creditors? | | | trative expenses | | • | - | xempt property is excluded and to distribute to unsecured creditors? | | |
| 18. | | any creditors do timate that you | | 1-49 50-99 100-199 200-999 | |] | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 | | |
| 19. | | uch do you te your assets to th? | | \$0-\$50,000 \$50,001-\$100, \$100,001-\$500 \$500,001-\$1 m | 0,000 | <u>.</u> | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| 20. | | uch do you te your liabilities to | | \$0-\$50,000 \$50,001-\$100, \$100,001-\$500 \$500,001-\$1 m | 0,000 |]]] | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |

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| Debtor 1 | Damian Lopez | | Case number (if known) | | | | |
|----------|--------------|--|---|--|--|--|--|
| Part 7: | Sign Below | | | | | | |
| For you | - | I have examined this petition, and I cand correct. | leclare under penalty of perjury that the information provided is true | | | | |
| | | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | | • | nt, concealing property, or obtaining money or property by fraud in an result in fines up to \$250,000, or imprisonment for up to 20 years, 19, and 3571. | | | | |
| | | X /s/ Damian Lopez Damian Lopez, Debtor 1 | X Signature of Debtor 2 | | | | |
| | | Executed on | Executed on | | | | |

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| Debtor 1 | Damian Lopez | | Case number (if know | wn) | | | | | |
|---|--------------|--|----------------------|---------------------|--|--|--|--|--|
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | | | | | |
| | | X /s/ Michelle Santos Signature of Attorney for Debtor | Date | e MM / DD / YYYY | | | | | |
| | | Michelle Santos Printed name Michelle Santos, Esq. Firm Name 4949 Grand Avenue, Suite 6A Number Street | | | | | | | |
| | | Gurnee City | IL State | 60031 ZIP Code | | | | | |
| | | Contact phone (312) 952-2681 | Email address Attor | neySantos@yahoo.com | | | | | |
| | | 6297527 Bar number | State | _ | | | | | |

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| Fill in this info | rmation to id | lentify yo | ur case a | nd this filing: | | | |
|---|--|--|---|--|------------------------------|---|--------------------------------------|
| Debtor 1 | Damian | | | Lopez | | | |
| _ | First Name | Middle N | Name | Last Name | _ | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle N | Name | Last Name | | | |
| | | | | | | | |
| United States Bank | cruptcy Court for | the: NORT | HERN DIS | TRICT OF ILLINOIS | | | |
| Case number (if known) | | | | | | | if this is an ed filing |
| Official Form | 1064/R | | | | | | |
| Schedule A/E | | , | | | | | 12/15 |
| the asset in the cate filing together, both sheet to this form. | egory where you are equally res On the top of ar | u think it fit sponsible fo ny additiona | s best. Be or supplying al pages, w | as complete and accura g correct information. If rite your name and case | ate as f more e numb | et fits in more than one cat possible. If two married pe space is needed, attach a s per (if known). Answer eve state You Own or Have | ople are separate ry question. |
| Pait I. Desi | CHIDE Each N | esiderice, | , Building | , Land, or Other Re | ai Es | date fou Own of have | an interest in |
| ✓ No. Go to | Part 2. | - | e interest ir | n any residence, buildin | g, land | l, or similar property? | |
| Yes. Whe | re is the property | f? | | | | | |
| | - | - | | your entries from Part that number here | | _ | \$0.00 |
| Part 2: Desc | cribe Your Ve | ehicles | | | | • | |
| you own that someor | _ | f you lease a | a vehicle, als | so report it on Schedule (| - | e registered or not? Include cutory Contracts and Unexpir | |
| ✓ Yes | | | | | | | |
| 3.1. Make: | Lexus | | Who has an Check one. | interest in the property | /? | Do not deduct secured clair amount of any secured clair | • |
| Model: | GS300 | | ☐ Debtor 1 | only | | Creditors Who Have Claims | s Secured by Property. |
| Year: | 2000 | | Debtor 2 | • | | Current value of the entire property? | Current value of the |
| Approximate mileage | e: 130,000 | | _ | and Debtor 2 only one of the debtors and a | nother | \$1,892.00 | portion you own? \$1,892.00 |
| Other information: | | | V / K lodot | one of the depters and a | 11011101 | Ψ1,092.00 | \$1,092.00 |
| 2000 Lexus GS30 130K Miles | 0 | 1 | | f this is community pro tructions) | perty | | |
| 3.2. Make: | Nissan | | Who has an Check one. | interest in the property | /? | Do not deduct secured clair amount of any secured clair | • |
| Model: | Altima | | ☑ Debtor 1 | only | | Creditors Who Have Claims | s Secured by Property. |
| Year: | 2010 | | Debtor 2 | • | | Current value of the | Current value of the |
| Approximate mileage | | | Debtor 1 and Debtor 2 only At least one of the debtors and another | | nother | entire property? | portion you own? |
| Other information: | | | ☐ Acieast | one of the deptots and a | nounel | \$0.00 | \$0.00 |
| 2010 Nissan Altin | na (approx. 11 | 0000 | | f this is community pro tructions) | perty | | |

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| Deb | tor 1 | Damian Lopez | Case number (if known) | | | | | | |
|-----|---|---|---|--|--|--|--|--|--|
| 4. | | | | | | | | | |
| 5. | Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | | | | | | | | |
| P | art 3: | Describe Your Personal and Household Items | | | | | | | |
| Do | you owr | or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. | | | | | | |
| 6. | | hold goods and furnishings | | | | | | | |
| | Examp ☐ No | les: Major appliances, furniture, linens, china, kitchenware | | | | | | | |
| | | s. Describe TV & Furniture | \$400.00 | | | | | | |
| 7. | Electro Examp | nics les: Televisions and radios; audio, video, stereo, and digital equipment; comp music collections; electronic devices including cell phones, cameras, me | | | | | | | |
| | ✓ No | s. Describe | | | | | | | |
| 8. | | ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures stamp, coin, or baseball card collections; other collections, memorabilia, | | | | | | | |
| | ✓ No ☐ Yes | s. Describe | | | | | | | |
| 9. | | nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, po canoes and kayaks; carpentry tools; musical instruments | ol tables, golf clubs, skis; | | | | | | |
| | ✓ No ☐ Yes | s. Describe | | | | | | | |
| 10. | Firearn Examp | ns les: Pistols, rifles, shotguns, ammunition, and related equipment | | | | | | | |
| | ✓ No ☐ Yes | s. Describe | | | | | | | |
| 11. | • | s <i>les:</i> Everyday clothes, furs, leather coats, designer wear, shoes, accessories | | | | | | | |
| | ☐ No ✓ Yes | s. Describe Normal Clothing | \$300.00 | | | | | | |
| 12. | Jewelr <i>Examp</i> | y les: Everyday jewelry, costume jewelry, engagement rings, wedding rings, he gold, silver | rloom jewelry, watches, gems, | | | | | | |
| | ✓ No ☐ Yes | s. Describe | | | | | | | |
| 13. | | rm animals les: Dogs, cats, birds, horses | | | | | | | |
| | | s. Describe Saltwater fish | \$500.00 | | | | | | |

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| Deb | tor 1 | Damian Lopez | | | Case number (if known) | |
|------|---------------|---|---|--|-------------------------------|---|
| 14. | Any ot | - | nousehold items you d | did not already list, including a | ny health aids you | |
| | | s. Give specific ormation | | | | |
| 15. | | | | Part 3, including any entries fo | _ | \$1,200.00 |
| Pa | art 4: | Describe You | ur Financial Asset | ts | | |
| Do y | ou owr | n or have any legal | or equitable interest i | in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | | petition | e in your wallet, in your | r home, in a safe deposit box, an | ld on hand when you file your | |
| | ✓ No | | | | Cash: | |
| 17 | _ | its of money | | | | |
| 17. | - | les: Checking, savi | ses, and other similar in | accounts; certificates of deposit; nstitutions. If you have multiple a | | |
| | ✓ No ☐ Yes | S | Institution n | name: | | |
| 18. | | les: Bond funds, inv | publicly traded stocks vestment accounts with | s n brokerage firms, money market | accounts | |
| | Yes | s | Institution or issuer na | ame: | | |
| | | | Stocks through en | mployment. | | \$200.00 |
| 19. | - | • | k and interests in inco tnership, and joint ve | orporated and unincorporated benture | ousinesses, including | |
| | | s. Give specific | | | | |
| | the | m | Name of entity: | | % of ownership: | |
| 20. | Negotia | able instruments inc | lude personal checks, d | egotiable and non-negotiable in cashiers' checks, promissory not transfer to someone by signing of | tes, and money orders. | |
| | info | s. Give specific ormation about | Issuer name: | | | |
| 21. | | ment or pension ac les: Interests in IRA profit-sharing p | A, ERISA, Keogh, 401(k | x), 403(b), thrift savings accounts | s, or other pension or | |
| | _ | s. List each | Type of account: | Institution name: | | |

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| Debt | or 1 | Damian Lopez | Case number (if known) | |
|------|------------------------|---|--|---|
| | Your s <i>Examp</i> | | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications | |
| | □ No ✓ Ye | 9S | Institution name or individual: Apartment Security Deposit | \$300.00 |
| | ☑ No | ties (A contract for a specific periodic p | payment of money to you, either for life or for a number of years) | |
| | Interes | ssIssuer name and distributions in an education IRA, in an account 5.C. §§ 530(b)(1), 529A(b), and 529(b)(1 | t in a qualified ABLE program, or under a qualified state tuition pr | ogram. |
| | _ | es Institution name a | and description. Separately file the records of any interests. 11 U.S.C | . § 521(c) |
| | power ☑ No | s exercisable for your benefit | erty (other than anything listed in line 1), and rights or | |
| 26 | inf | es. Give specific formation about them | rate, and other intellectual property. | |
| | | | proceeds from royalties and licensing agreements | |
| | ☐ Ye | es. Give specific formation about them | | |
| | Examp | - ' | angibles es, cooperative association holdings, liquor licenses, professional licer | ses |
| | | es. Give specific formation about them | | |
| Mone | ey or p | property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax re | funds owed to you | | |
| | ab yo | es. Give specific information rout them, including whether u already filed the returns d the tax years | Federa State: Local: | l: |
| | - | / support oles: Past due or lump sum alimony, spo | ousal support, child support, maintenance, divorce settlement, propert | y settlement |
| | ✓ No | o es. Give specific information | Alimony: | |
| | ⊔ '° | o. Give specime information | Maintenance: | |
| | | | Support: | |
| | | | Divorce settlement | : |
| | | | Property settlemen | |

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| Deb | otor 1 Damian Lopez | Case number (if known) | |
|-----|---|---|---|
| 30. | Other amounts someone owes you Examples: Unpaid wages, disability insurance payment compensation, Social Security benefits; unp | | |
| | ✓ No✓ Yes. Give specific information | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; health sa | avings account (HSA); credit, homeowner's, or renter's insura | nce |
| | No Yes. Name the insurance company of each policy and list its value Company name: | Beneficiary: Si | urrender or refund value: |
| | ERISA-Qualified 40 | 01K | \$600.00 |
| 32. | Any interest in property that is due you from someon If you are the beneficiary of a living trust, expect procees entitled to receive property because someone has died | eds from a life insurance policy, or are currently | |
| | ✓ No✓ Yes. Give specific information | | |
| 33. | Claims against third parties, whether or not you hav Examples: Accidents, employment disputes, insurance | • • | |
| | ✓ No✓ Yes. Describe each claim | | |
| 34. | Other contingent and unliquidated claims of every naights to set off claims | nature, including counterclaims of the debtor and | |
| | ✓ No✓ Yes. Describe each claim | | |
| 35. | Any financial assets you did not already list | | |
| | ✓ No✓ Yes. Give specific information | | |
| 36. | Add the dollar value of all of your entries from Part 4 attached for Part 4. Write that number here | | \$1,100.00 |
| Pa | art 5: Describe Any Business-Related Prop | oerty You Own or Have an Interest In. List any | real estate in Part 1. |
| 37. | Do you own or have any legal or equitable interest in | n any business-related property? | |
| | ✓ No. Go to Part 6.✓ Yes. Go to line 38. | | |
| | | | Current value of the portion you own? Do not deduct secured |
| 38. | Accounts receivable or commissions you already ea | arned | claims or exemptions. |
| | ✓ No ☐ Yes. Describe | | |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, software, mode desks, chairs, electronic devices | lems, printers, copiers, fax machines, rugs, telephones, | |
| | ✓ No ☐ Yes. Describe | | |

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| Debt | tor 1 | Damian Lopez | Case number (if known) | |
|------|-------------------|---|-------------------------------------|---|
| 40. | Machin | ery, fixtures, equipment, supplies you use in business, and tools o | f your trade | |
| | ✓ No | s. Describe | | _ |
| 41. | Invento | ory | | |
| | ✓ No | s. Describe | | |
| 42. | Interes | ts in partnerships or joint ventures | | |
| | ✓ No | s. Describe Name of entity: | % of ownership: | |
| 43. | Custon | ner lists, mailing lists, or other compilations | | |
| | ✓ No ☐ Yes | s. Do your lists include personally identifiable information (as defined by No Yes. Describe | ned in 11 U.S.C. § 101(41A))? | |
| 44. | Any bu | siness-related property you did not already list | | |
| | ✓ No ☐ Yes | s. Give specific information. | | |
| 45. | | e dollar value of all of your entries from Part 5, including any entries of for Part 5. Write that number here | | \$0.00 |
| Pa | | Describe Any Farm- and Commercial Fishing-Related Fif you own or have an interest in farmland, list it in Part 1. | Property You Own or Have an Interes | t In. |
| 46. | Do you | own or have any legal or equitable interest in any farm- or commer | rcial fishing-related property? | |
| | | Go to Part 7. s. Go to line 47. | | |
| | | | portion y Do not de | value of the vou own? educt secured exemptions. |
| 47. | Farm a Example | nimals les: Livestock, poultry, farm-raised fish | | • |
| | ✓ No ☐ Yes | S | | |
| 48. | Crops- | either growing or harvested | | |
| | | s. Give specific ormation | | |
| 49. | Farm a | nd fishing equipment, implements, machinery, fixtures, and tools o | f trade | |
| | ✓ No | 3 | | |
| 50. | Farm a | nd fishing supplies, chemicals, and feed | | |
| | ✓ No ☐ Yes | 3 | | |

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| Deb | tor 1 Damian Lopez | Case nu | ımber (if known) | | | |
|-----|--|----------------------|------------------------------|----------|---|------------|
| 51. | Any farm- and commercial fishing-related property you did not | already list | | | | |
| | Yes. Give specific information | | | | | |
| 52. | Add the dollar value of all of your entries from Part 6, including attached for Part 6. Write that number here | | | → | | \$0.00 |
| Pa | Tree Tree Tree Tree Tree Tree Tree Tree | terest in That You [| Did Not List A | bov | е | |
| 53. | Do you have other property of any kind you did not already list Examples: Season tickets, country club membership | ? | | | | |
| | ✓ No ☐ Yes. Give specific information. | | | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write the | at number here | | → | | \$0.00 |
| Pa | art 8: List the Totals of Each Part of this Form | | | | | |
| 55. | Part 1: Total real estate, line 2 | | | → | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$1,892.00 | | | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,200.00 | | | | |
| 58. | Part 4: Total financial assets, line 36 | \$1,100.00 | | | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | | | |
| 61. | Part 7: Total other property not listed, line 54 | \$0.00 | | | | |
| 62. | Total personal property. Add lines 56 through 61 | \$4,192.00 | Copy personal property total | → | + | \$4,192.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | | | \$4,192.00 |

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|--|---|---|--|---|---------|--|
| Debtor 1 Debtor 2 (Spouse, if filing) United States Bankruptcy Co Case number (if known) Official Form 106C | Middle N Middle N ourt for the: NORT | Lopez Name Last Name Name Last Name CHERN DISTRICT OF I | | ☐ Check if this is an amended filing | 0.4/4.0 | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on <i>Schedule A/B: Property</i> (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of <i>Part 2: Additional Page</i> as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptionssuch as those for health aids, rights to receive certain benefits, and tax-exempt retirement fundsmay be unlimited in dollar amount. However, if you claim an | | | | | | |
| property is determined to ex | ceed that amount | | • | dollar amount and the value of the able statutory amount. | | |
| You are claiming sta | | | | | | |
| 2. For any property you lis | st on <i>Schedule A/I</i> | B that you claim as exen | npt, fill in the information | on below. | | |
| Brief description of the prop Schedule A/B that lists this p | • | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption | Specific laws that allow exempt | iion | |
| Brief description: | ox 130000 miles | \$1,892.00 | \$0.00 | 735 ILCS 5/12-1001(c) | | |

3. Are you claiming a homestead exemption of more than \$160,375?

| (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of ad | justment. |
|---|-----------|
|---|-----------|

\$0.00

☑ No

2000 Lexus GS300

Line from Schedule A/B: 3.1

Line from Schedule A/B: 3.2

2010 Nissan Altima (approx. 110000 miles)

130K Miles

Brief description:

Tyes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

□ No □ Yes

value, up to any

limit

limit

 $\overline{\mathbf{M}}$

applicable statutory

\$0.00

100% of fair market

applicable statutory

value, up to any

735 ILCS 5/12-1001(c)

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| Debitor 1 Damian Lopez | | Case numbe | r (if known) |
|---|--|---|------------------------------------|
| Part 2: Additional Page | | | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: TV & Furniture | \$400.00 | \$400.00 100% of fair market | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B:6 | | value, up to any applicable statutory limit | |
| Brief description: Normal Clothing | \$300.00 | \$300.00 100% of fair market | 735 ILCS 5/12-1001(a), (e) |
| Line from Schedule A/B:11 | | value, up to any applicable statutory limit | |
| Brief description: Saltwater fish | \$500.00 | \$500.00 100% of fair market | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B:13 | | value, up to any applicable statutory limit | |
| Brief description: Stocks through employment. | \$200.00 | \$200.00 100% of fair market | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B:18 | | value, up to any applicable statutory limit | |
| Brief description: Apartment Security Deposit | \$300.00 | \$300.00 100% of fair market | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 22 | | value, up to any applicable statutory limit | |
| Brief description: ERISA-Qualified 401K | \$600.00 | \$600.00 100% of fair market | 735 ILCS 5/12-1001(f) |
| Line from Schedule A/B: 31 | | value, up to any applicable statutory limit | |

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| | _ | entify your case: | | | | |
|---|--|--|-----------------------------|--|------------------------|-------------|
| Debtor 1 | Damian First Name | Middle Name | Lopez Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for | the: NORTHERN D | ISTRICT OF ILLINO | IS | | |
| Case number | | | | | ☐ Check if this is | s an |
| (if known) | | | | | amended filing | |
| Official Form | 106D | | | | | |
| Schedule D: | Creditors \ | Nho Have Clai | ims Secured b | v Property | | 12/15 |
| | | | | | ly responsible for sup | |
| On the top of any Do any credit No. Che | No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. | | | | | |
| Part 1: Lis | t All Secured | Claims | | | | |
| claim, list the creditor has a much as poss | claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the Column A Column B Value of collateral that supports this portion | | | | | Unsecured |
| 2.1 | | | property that | \$16,496.00 | \$0.00 | \$16,496.00 |
| Bridgecrest | | secures the c ——— 2010 Nissar | n Altima (approx. | | | <u> </u> |
| Creditor's name PO Box 29018 | | 110000 mile | | | | |
| Phoenix City Who owes the dek Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this c to a community Date debt was inc | Debtor 2 only the debtors and a claim relates ty debt | Continger Unliquidar Disputed Nature of lier An agreer Statutory Judgment Other (inc | ted . Check all that apply | is mortgage or secured nechanic's lien) | car loan) | |
| Date dept was IIIC | uiieu <u>VI/ZVI/</u> | Last 4 digits | or account number | 8 8 0 1 | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$16,496.00

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| Debtor 1 Damian Lopez | | Case number (if | known) | | |
|---|---|--|---|-----------------------------------|--|
| Additional Page Part 1: After listing any entries on sequentially from the previous | | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | |
| Eranklin Financial Creditor's name Dealer Financial System Number Street Michael Collection Dept | Describe the property that secures the claim: 2000 Lexus GS300 130K Miles | \$6,392.00 | \$1,892.00 | \$4,500.00 | |
| 6001 W. Capitol Drive, Ste 205 Milwaukee WI 53216 City State ZIP Code Who owes the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Non-Purchase Money | | | | |
| Date debt was incurred 03/2015 | Last 4 digits of account number | 0 0 2 0 | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$6,392.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$22,888.00

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| Fill in this inf | Fill in this information to identify your case: | | | | | |
|---|---|-------------|-----------|---|---------------------|--|
| Debtor 1 | Damian | | Lopez | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | | | | |
| Case number | | | | П | Check if this is an | |
| (if known) | | | | | amended filing | |

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
 - No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

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| Debtor 1 | Damian Lopez | Case number (if known) | |
|-------------------------------------|--|---|-------------|
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | |
| □ N | y creditors have nonpriority unsecured o. You have nothing to report in this part es | I claims against you? . Submit this form to the court with your other schedules. | |
| If a cre type of | ditor has more than one nonpriority unse claim it is. Do not list claims already inc | in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed luded in Part 1. If more than one creditor holds a particular claim, list the oth unsecured claims, fill out the Continuation Page of Part 2. | • |
| | | | Total claim |
| 4.1 Nonpriority Cr | editor's Name | _ Last 4 digits of account number | \$0.00 |
| | Street | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| Debtor Debtor Debtor At least Check | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| Nonpriority Cr 3515 N. Ri | First Finance reditor's Name idge Road, #200 Street | Last 4 digits of account number 1 3 8 0 When was the debt incurred? 12/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | \$939.00 |
| Debtor Debtor Debtor At least | - | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Non-Purchase Money | |

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| Debtor 1 | Damian Lopez | Case number (if known) | |
|---|--|---|-------------|
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listin | ng any entries on this page, number the page. | m sequentially from the | Total claim |
| 4.3 | | | \$3,268.00 |
| Nonpriority C | Bank Delaware Creditor's Name | Last 4 digits of account number 8 7 8 7 When was the debt incurred? 07/2014 | |
| Number Street | | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | |
| Wilmingto | on DE 19801 | Disputed | |
| Debtor Debtor Debtor At leas Check | State ZIP Code curred the debt? Check one. botor 1 only botor 2 only botor 1 and Debtor 2 only east one of the debtors and another eck if this claim is for a community debt Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or that you did not report as priority claims Debts to pension or profit-sharing plans, and other si Other. Specify Credit Card | | |
| Is the clair No Yes | m subject to offset? | | |
| 4.4 | | | \$734.00 |
| Nonpriority C | redit Union Creditor's Name ilwaukee Ave. Street | Last 4 digits of account number 0 0 5 8 When was the debt incurred? 03/2015 As of the date you file, the claim is: Check all that apply. Unliquidated | |
| Vernon H | | ─ | |
| Debtor Debtor Debtor Debtor At leas Check | State ZIP Code red the debt? Check one. 1 only 2 only 1 and Debtor 2 only st one of the debtors and another if this claim is for a community debt m subject to offset? | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Non-Purchase Money | |

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| Debtor 1 Damian Lopez | Case number (if known) | |
|---|---|-------------------|
| Part 2: Your NONPRIORITY Unse | cured Claims Continuation Page | |
| After listing any entries on this page, number previous page. | them sequentially from the | Total claim |
| 4.5 | | \$14,853.00 |
| Baxter Credit Union Nonpriority Creditor's Name 340 N. Milwaukee Ave. | Last 4 digits of account number 5 5 9 5 When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | |
| Vernon Hills IL 60061 | Disputed | |
| City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community deb | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Non-Purchase Money | |
| Is the claim subject to offset? No Yes 4.6 | | \$1.094.00 |
| Best Buy Nonpriority Creditor's Name PO Box 6497 Number Street | Last 4 digits of account number 0 8 1 4 When was the debt incurred? 07/2014 As of the date you file, the claim is: Check all that apply. Unliquidated | \$1,034.00 |
| Sioux Falls SD 57117 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community deb | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | |

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| Debtor 1 | Damian Lopez | Case number (if known) | |
|---|---|---|-------------|
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listin | ng any entries on this page, number the page. | em sequentially from the | Total claim |
| 4.7 | | | \$100.00 |
| BMO Har | rris Bank Creditor's Name | Last 4 digits of account number | |
| 3800 Gol | | When was the debt incurred? 2017 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | ☐ Contingent ☐ Unliquidated ☐ U | |
| | | Disputed | |
| Rolling N | Meadows IL 60008 State ZIP Code | — (Neverties III) | |
| , | rred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| ☑ Debto | r 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| ш | r 2 only | that you did not report as priority claims | |
| ш | r 1 and Debtor 2 only st one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | | ✓ Other. Specify Credit Card | |
| _ | m subject to offset? | Credit Card | |
| No No | in subject to onset. | | |
| Yes | | | |
| 4.0 | | | |
| 4.8 | | | \$678.00 |
| | One Bank USA NA Creditor's Name | Last 4 digits of account number <u>3</u> <u>2</u> <u>5</u> <u>6</u> | |
| PO Box 3 | | When was the debt incurred? 09/2014 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | □ Contingent □ Unliquidated | |
| | | ☐ Unliquidated ☐ Disputed | |
| Salt Lake | | · | |
| City Who incus | State ZIP Code rred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | r 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| ш | r 2 only | that you did not report as priority claims | |
| ш | r 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| ш | st one of the debtors and another | ✓ Other. Specify | |
| _ | c if this claim is for a community debt | Credit Card | |
| | m subject to offset? | | |
| ✓ No ☐ Yes | | | |

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| Debtor 1 | Damian Lopez | Case number (if known) | |
|---|---|--|-------------|
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listin | ng any entries on this page, number the page. | em sequentially from the | Total claim |
| 4.9 | | | \$682.00 |
| Capital O | ne Bank USA NA | Last 4 digits of account number 3 2 6 3 | |
| Nonpriority C PO Box 3 | creditor's Name | When was the debt incurred? 07/2014 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | □ Contingent □ Unliquidated | |
| | | ☐ Unliquidated ☐ Disputed | |
| Salt Lake | City UT 84130 State ZIP Code | | |
| • | red the debt? Check one. | Type of NONPRIORITY unsecured claim: Student loans | |
| | 1 only | ☐ Obligations arising out of a separation agreement or divorce | |
| ш | · 2 only · 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | | ✓ Other. Specify Credit Card | |
| | m subject to offset? | | |
| ✓ No ☐ Yes | | | |
| | | | |
| 4.10 | | | \$100.00 |
| Chase Ba | | Last 4 digits of account number | |
| | Creditor's Name :: Bankruptcy Department | When was the debt incurred? 2017 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| PO Box 1 | 5298 | Contingent | |
| | | ☐ Unliquidated ☐ Disputed | |
| Wilmingto | | _ _ | |
| City Who incur | State ZIP Code red the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| ✓ Debtor | 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| | 2 only | that you did not report as priority claims | |
| ш | 1 and Debtor 2 only st one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ш | if this claim is for a community debt | ✓ Other. Specify | |
| _ | m subject to offset? | Credit Card | |
| ✓ No | 542,551 10 011501. | | |
| ☐ Yes | | | |

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| Debtor 1 | Damian Lopez | Case number (if known) | |
|-----------------|---|---|-------------|
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listin | ng any entries on this page, number the page. | em sequentially from the | Total claim |
| 4.11 | | | \$208.00 |
| | ollection Service | Last 4 digits of account number _5_ 8_ 8_ 9_ | |
| Nonpriority C | Creditor's Name | When was the debt incurred? 10/2015 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| - | | ☐ Contingent ☐ Unliquidated | |
| | | Disputed | |
| Norwood City | MA 02062 State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| | rred the debt? Check one. | Student loans | |
| <u> </u> | r 1 only r 2 only | Obligations arising out of a separation agreement or divorce | |
| | r 1 and Debtor 2 only | that you did not report as priority claims | |
| At leas | st one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| ☐ Check | if this claim is for a community debt | Collecting for - | |
| | m subject to offset? | | |
| ✓ No ☐ Yes | | | |
| Nationwi | de | | |
| 4.12 | | | \$380.00 |
| Credit Or | | Last 4 digits of account number 6 1 1 0 | |
| PO Box 9 | Creditor's Name | When was the debt incurred? 09/2014 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | ☐ Contingent ☐ Unliquidated ☐ U | |
| | NV 00400 | Disputed | |
| Las Vega | NV 89193 State ZIP Code | | |
| | rred the debt? Check one. | Student loans | |
| <u> </u> | r 1 only r 2 only | Obligations arising out of a separation agreement or divorce | |
| | r 1 and Debtor 2 only | that you did not report as priority claims | |
| At leas | st one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| ☐ Check | cif this claim is for a community debt | Credit Card | |
| | m subject to offset? | | |
| ✓ No Yes | | | |

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| Debtor 1 | Damian Lopez | Case number (if known) | |
|---|---|--|-------------|
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listin | g any entries on this page, number the page. | em sequentially from the | Total claim |
| 4.13 | | | \$1,156.00 |
| DSNB/Ma | , | Last 4 digits of account number 1 6 6 4 | |
| Nonpriority C PO Box 8 | reditor's Name | When was the debt incurred? 7/2014 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | | |
| | | — ☐ Disputed | |
| Mason | OH 45050 | ' _ | |
| City Who incur | State ZIP Code red the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| ⊘ Debtor | | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor | | that you did not report as priority claims | |
| | 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| ш | at one of the debtors and another | ✓ Other. Specify | |
| _ | if this claim is for a community debt | Credit Card | |
| | n subject to offset? | | |
| ✓ No ☐ Yes | | | |
| 4.14 | | | \$305.00 |
| | Rose & Sons Development | Last 4 digits of account number o p e z | Ψουσ.υυ |
| Nonpriority C | reditor's Name | When was the debt incurred? | |
| 38525 Wo | oodward Ave. Street | As of the date you file, the claim is: Check all that apply. | |
| PO Box 2 | | _ Contingent | |
| | | Unliquidated | |
| Bloomfie | ld Hills MI 48303 | — Disputed | |
| City | State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| | red the debt? Check one. | ☐ Student loans | |
| ☑ Debtor | • | Obligations arising out of a separation agreement or divorce | |
| ☐ Debtor | 1 and Debtor 2 only | that you did not report as priority claims | |
| | at one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Check if this claim is for a community debt | | ✓ Other. Specify Collecting for - | |
| Is the claim subject to offset? | | Concounty for - | |
| ₩ No | , | | |
| Yes | | | |
| Apartmer | nt Lease | | |

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| Debtor 1 | Damian Lopez | Case number (if known) | |
|--|--|---|-------------|
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listin | ng any entries on this page, number the page. | m sequentially from the | Total claim |
| 4.15 | | | \$983.00 |
| Enhanced Recovery Company Nonpriority Creditor's Name PO Box 57547 Number Street | | Last 4 digits of account number 4 9 0 4 When was the debt incurred? 05/2016 As of the date you file, the claim is: Check all that apply. Contingent | |
| | | Unliquidated Disputed | |
| Debtor Debtor Debtor Debtor At leas | state ZIP Code rred the debt? Check one. r 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and another x if this claim is for a community debt m subject to offset? | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - | |
| 4.16 | | | \$983.00 |
| GC Services Nonpriority Creditor's Name 6330 Gulfton Street Number Street | | Last 4 digits of account number 3 0 4 4 When was the debt incurred? 05/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| Debtor Debtor Debtor Debtor At leas Check | TX 77081 State ZIP Code rred the debt? Check one. r 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and another x if this claim is for a community debt m subject to offset? | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - | |

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| Debtor 1 | Damian Lopez | Case number (if known) | |
|-----------------|--|--|-------------|
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listin | ng any entries on this page, number the page. | em sequentially from the | Total claim |
| 4.17 | | | \$1,479.00 |
| | Funding LLC | Last 4 digits of account number | |
| | Creditor's Name thside Drive, Suite 300 | When was the debt incurred? 07/2016 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent | |
| | | Disputed | |
| San Dieg | o CA 92108 State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incur | red the debt? Check one. | Student loans | |
| ☑ Debtor | | Obligations arising out of a separation agreement or divorce | |
| ☐ Debtor | · 1 and Debtor 2 only | that you did not report as priority claims | |
| ш | st one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| ☐ Check | if this claim is for a community debt | Collecting for - | |
| | m subject to offset? | | |
| ✓ No Yes | | | |
| Citibank, | NΔ | | |
| | NA . | | |
| 4.18 | | | \$865.00 |
| | Finance Corporation Creditor's Name | Last 4 digits of account number1153_ | |
| PO Box 3 | | When was the debt incurred? 07/2015 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent | |
| Spartanb | ourg SC 29304 | Disputed | |
| City | State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| | red the debt? Check one. | Student loans | |
| ✓ Debtor Debtor | • | Obligations arising out of a separation agreement or divorce | |
| ш | 1 and Debtor 2 only | that you did not report as priority claims | |
| At leas | st one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| ☐ Check | if this claim is for a community debt | Credit Card | |
| | m subject to offset? | | |
| ✓ No ☐ Yes | | | |

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| Debtor 1 | Damian Lopez | Case number (if known) | |
|---------------------------------|---|--|-------------|
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listin | ng any entries on this page, number the page. | em sequentially from the | Total claim |
| 4.19 | | | \$1,001.00 |
| | PaypalSmartConn | Last 4 digits of account number 4 1 7 7 | |
| Nonpriority C | Creditor's Name | When was the debt incurred? 07/2014 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | | Unliquidated Disputed | |
| Orlando | FL 32896 State ZIP Code | | |
| City Who incur | red the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | r 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| | r 2 only | that you did not report as priority claims | |
| | r 1 and Debtor 2 only st one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| ш | if this claim is for a community debt | ✓ Other. Specify Credit Card | |
| _ | m subject to offset? | orealt sara | |
| ☑ No | • | | |
| Yes | | | |
| 4.20 | | | \$699.00 |
| SYNCB/V | Valmart | Last 4 digits of account number 8 0 7 5 | |
| Nonpriority C | Creditor's Name | When was the debt incurred? 07/2014 | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | | Unliquidated Disputed | |
| Orlando | FL 32896 | | |
| City Who incur | State ZIP Code Tred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| ☑ Debtor | r 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| _ | r 2 only | that you did not report as priority claims | |
| | r 1 and Debtor 2 only st one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| ш | if this claim is for a community debt | ✓ Other. Specify Credit Card | |
| Is the claim subject to offset? | | Orealt Gala | |
| ✓ No | , | | |
| ☐ Yes | | | |

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| Span | Debtor 1 Damian Lo | opez | Case number (if known) | | |
|--|---|---|---|--|--|
| Supplemental Street Supplemental Street Supplemental Street Supplemental Street Supplemental Street Supplemental Street Stre | Part 2: Your NO | Part 2: Your NONPRIORITY Unsecured Claims Continuation Page | | | |
| Weldon Spring Weldon Spring Mo 63304 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? 2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - | previous page. | on this page, number the | em sequentially from the | | |
| Weldon Spring MO 63304 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No ✓ No ✓ Check one. ✓ Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Collecting for - | Nonpriority Creditor's Name 500 Technology Drive, Suite 550 | | When was the debt incurred? 2017 As of the date you file, the claim is: Check all that apply. Contingent | | |
| | City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | | |

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Case number (if known) _

| Part 3: List Oth | ers to Be | e Notified Ab | out a Debt That You Already Listed |
|----------------------------|---|---|--|
| For example, if a co | ollection ag or 2, then li d in Parts | gency is trying t ist the collection 1 or 2, list the a | otified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. To collect from you for a debt you owe to someone else, list the original in agency here. Similarly, if you have more than one creditor for any of the dditional creditors here. If you do not have additional parties to be notified for bmit this page. |
| ACS Inc-Education Se | ervicing | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name PO Box 7060 | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | —— Last 4 digits of account number 9 0 9 5 |
| Utica | NY | 13504 | <u> </u> |
| City Student Loan | State | ZIP Code | |
| Ottudent Loan | | | |
| Citibank NA | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name PO Box 20507 | | | Line 4.17 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | — Last 4 digits of account number 7 1 2 7 |
| Kansas City City | MO | 64195 ZIP Code | |
| Спу | State | ZIP Code | |
| CitiBank NA | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name 701 E. 60th Street | | | Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | |
| North Ciaux Falla | SD. | E7447 | Last 4 digits of account number 2 1 7 9 |
| North Sioux Falls City | SD State | 57117 ZIP Code | |
| | | | |
| Fedloan Servicing Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO Box 60610 | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | —— Last 4 digits of account number 7 F D 0 |
| Harrisburg | PA | 17106 | |
| City | State | ZIP Code | |
| Student Loan | | | |
| Fedloan Servicing | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name PO Box 60610 | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | <u> </u> |
| Harrichura | DA | 17106 | Last 4 digits of account number 7 F D 0 |
| Harrisburg City | PA State | 17106 ZIP Code | |
| Student Loan | | | |

Debtor 1

Damian Lopez

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| Debtor 1 Damian | Lopez | Case number (if known) |
|---------------------------------------|----------------------------|---|
| Part 3: List O | thers to Be Notified Ab | out a Debt That You Already Listed Continuation Page |
| Fedloan Servicing | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name PO Box 60610 Number Street | | Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Harrisburg City Student Loan | PA 17106 State ZIP Code | Last 4 digits of account number <u>7</u> <u>F</u> <u>D</u> <u>0</u> |
| LVNV Funding LLC | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name c/o Resurgent Capi | tal Services | Line 4.12 of <i>(Check one):</i> Part 1: Creditors with Priority Unsecured Claims |
| Number Street PO BOX 10497 MS | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Greenville City | SC 29603 State ZIP Code | Last 4 digits of account number 6 1 0 |
| Nationwide Headqu | arters | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name PO Box 607 Number Street | | Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Norwood City | MA 02062 State ZIP Code | Last 4 digits of account number <u>5</u> <u>8</u> <u>8</u> <u>9</u> |
| Sprint | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO Box 4191 Number Street | | Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Carol Stream | IL 60197 State ZIP Code | Last 4 digits of account number |
| Sprint | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name 6391 Sprint Parkwa Number Street | у | Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Overland Park City | KS 66251 State ZIP Code | Last 4 digits of account number |
| Sprint | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name PO Box 4191 | | Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Caval Street | II 00407 | Last 4 digits of account number |
| Carol Stream | IL 60197 State ZIP Code | <u> </u> |

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Case number (if known)

| Part 4: | Add t | he Amounts for Each Type of Unsecured Claim | | |
|--------------|-------|--|------------------|---------------------|
| | | its of certain types of unsecured claims. This information is for statistica Add the amounts for each type of unsecured claim. | l report | ting purposes only. |
| | | | | Total claim |
| Total claims | 6a. | Domestic support obligations | 6a. | \$0.00 |
| | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. - | \$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$0.00 |
| | | | | Total claim |
| Total claims | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | ^{6i.} → | \$31,506.00 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$31,506.00 |

Debtor 1

Damian Lopez

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| Fill in this information to identify your case: | | | | | | | |
|---|------------------------|-------------|-----------|--|---------------------|--|--|
| Debtor 1 | Damian | | Lopez | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Ba | nkruptcy Court for the | | | | | | |
| Case number | | | | | Check if this is an | | |
| (if known) | | | | | amended filing | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| Fill in this information to identify your case: | | | | | |
|---|--------------------|---------------------------|---------------------|--|--|
| Debtor 1 | Damian | Lopez | | | |
| l | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | inkruptcy Court fo | or the: NORTHERN D | ISTRICT OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | |
| | | | | | |

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

| | ✓ No Yes | |
|----|--|--|
| 2. | Within the last 8 years, have you lived in a community proper include Arizona, California, Idaho, Louisiana, Nevada, New Mexic | rty state or territory? (Community property states and territories co, Puerto Rico, Texas, Washington, and Wisconsin.) |
| | No. Go to line 3. | |
| | Yes. Did your spouse, former spouse, or legal equivalent liv | ve with you at the time? |
| | _ No | |
| | Yes | |
| 3. | person shown in line 2 again as a codebtor only if that person | Official Form 106E/F), or Schedule G (Official Form 106G). Use |
| | Column 1: Your codebtor | Column 2: The creditor to whom you owe the debt |
| | | Check all schedules that apply: |

Official Form 106H Schedule H: Your Codebtors page 1

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| Fill | in this inforn | nation to i | dentify your case: | | | | | |
|---------------------|---|-----------------|--|---|--------|----------|----------------|--|
| De | ebtor 1 | Damian | | Lopez | | | | |
| | | First Name | Middle Name | Last Name | | | Ch | eck if this is: |
| | ebtor 2 pouse, if filing) | First Name | Middle Name | Last Name | | | _ | An amended filing |
| | nited States Bank | ruptcy Court | for the: NORTHERN | DISTRICT OF IL | LING | OIS | _ | A supplement showing postpetition |
| | ase number | | | | _ | | | chapter 13 income as of the following date |
| <u>`</u> | known) | | | | | | | MM / DD / YYYY |
| | cial Form 10 | | | | | | | |
| Sch | nedule I: Yo | ur Incor | ne | | | | | 12/15 |
| includabour your | de information a t your spouse. I name and case i | bout your space | pouse. If you are separ e is needed, attach a se nown). Answer every q | ated and your spo parate sheet to th | use | is not | filing with y | spouse is living with you, you, do not include information f any additional pages, write |
| Pai | rt 1: Descr | ibe Emplo | yment | | | | | |
| | Fill in your emploinformation. | oyment | | Debtor 1 | | | | Debtor 2 or non-filing spouse |
| j | If you have more toob, attach a sepawith information a | rate page | Employment status | ✓ Employed✓ Not employed | ed | | | Employed Not employed |
| 6 | additional employ | ers. | Occupation | Sales Associa | te | | | |
| | Include part-time, or self-employed v | | Employer's name | Aldo (Call It Sp | oring | j) | | |
| 5 | Occupation may instruction or homem applies. | | Employer's address | PO Box 128 Number Street | | | | Number Street |
| | | | | | | | | |
| | | | | Windham | | NH | 03087 | |
| | | | | City | | State | Zip Code | City State Zip Code |
| | | | How long employed th | here? 3 Mont | hs | | _ | |
| Pai | rt 2: Give I | Notaile Ah | out Monthly Incom | 0 | | | | |
| | | | • | | | | | · • • • • • • • • • • • • • • • • • • • |
| | nate monthly inc iling spouse unles | | - | n. If you have noth | ing to | o repor | t for any line | e, write \$0 in the space. Include your |
| | | | e more than one employe arate sheet to this form. | er, combine the info | orma | tion for | all employe | ers for that person on the lines below. If |
| | | | | | | For D | Debtor 1 | For Debtor 2 or non-filing spouse |
| ŗ | | | alary, and commissions I monthly, calculate what | | 2. | _ | \$85.52 | |
| 3. I | Estimate and list | monthly ov | ertime pay. | | 3. | + | \$0.00 | |
| 4. (| Calculate gross i | income ∆d | d line 2 + line 3 | | 4 | | \$85.52 | |

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| Deb | btor 1 Damian Lopez | | Case num | nber (if known) | | |
|-----|--|--------------------|---------------------|----------------------------|----------|-------------------------|
| | | F | or Debtor 1 | For Debtor 2 non-filing sp | | |
| | Copy line 4 here | 4. | \$85.52 | | | |
| 5. | List all payroll deductions: | | | | | |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$9.78 | | | |
| | 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | | |
| | 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | | |
| | 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | | |
| | 5e. Insurance | 5e. | \$0.00 | | | |
| | 5f. Domestic support obligations | 5f. | \$0.00 | | | |
| | 5g. Union dues | 5g. | \$0.00 | | | |
| | 5h. Other deductions. | - 3- | · · · | | | |
| | Specify: | 5h. + | \$0.00 | | | |
| 6. | Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$. | 6. | \$9.78 | | | |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$75.74 | | | |
| 8. | List all other income regularly received: | | | | | |
| | 8a. Net income from rental property and from operating a business, profession, or farm | 8a. | \$0.00 | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | |
| | 8b. Interest and dividends | 8b. | \$0.00 | | | |
| | 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | | _ | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | |
| | 8d. Unemployment compensation | 8d. | \$654.00 | | | |
| | 8e. Social Security | 8e. | \$0.00 | | | |
| | 8f. Other government assistance that you regularly receive | | · · | | | |
| | Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | |
| | Specify: | 8f. | \$0.00 | | | |
| | 8g. Pension or retirement income | 8g. | \$0.00 | | | |
| | 8h. Other monthly income. | - | | | | |
| _ | Specify: Uber | _ ^{8h.} + | \$329.67 | | _ | |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$983.67 | | _ | |
| 10. | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$1,059.41 | + |]= | \$1,059.41 |
| 11. | State all other regular contributions to the expenses that you list in a Include contributions from an unmarried partner, members of your house friends or relatives. | | | roommates, a | nd other | |
| | Do not include any amounts already included in lines 2-10 or amounts th | at are not | available to pay e | xpenses listed | in Sched | dule J. |
| | Specify: | | | | 11. + | \$0.00 |
| 12. | . Add the amount in the last column of line 10 to the amount in line 11 | . The res | ult is the combined | d monthly | 12. | \$1,059.41 |
| | income. Write that amount on the Summary of Your Assets and Liabilitie if it applies. | | | | | Combined monthly income |

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| Deb | tor 1 | Dami | ian Lopez | | Case number (if known) | |
|-----|-------------------------|-----------|----------------|---|------------------------|--|
| 13. | Doy | ou expec | ct an increase | or decrease within the year after you file this form? | | |
| | $\overline{\mathbf{A}}$ | No. | None. | | | |
| | | Yes. Expl | olain: | | | |
| | | | | | | |

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| F | ill in this inforr | nation to id | entif | y your case: | | | Cho | ck if this | vie: | |
|------|--|------------------------------------|----------|--|-------------|--|---------|------------|-----------------------------------|-----------------|
| | Debtor 1 | Damian | | | Lope | z | | | ended filing | |
| | Dahtano | First Name | | Middle Name | Last Na | ame | | A supp | lement showing r 13 expenses a | |
| | Debtor 2 (Spouse, if filing) | First Name | | Middle Name | Last Na | ame | | - | ng date: | |
| | United States Bank | ruptcy Court fo | r the: | NORTHERN D | ISTRICT O | F ILLINOIS | | MM / D | D / YYYY | _ |
| | Case number (if known) | | | | | | | | | |
| Of | fficial Form 10 | 06J | | | | | | | | |
| Sc | chedule J: Yo | our Expei | nses | 3 | | | | | | 12/15 |
| cor | rrect information. me and case numb | If more space er (if known). | is nee | eded, attach anoth ver every question | er sheet to | ing together, both a this form. On the to | - | - | | |
| P | Part 1: Descr | ibe Your Ho | ouse | hold | | | | | | |
| 1. | Is this a joint cas | se? | | | | | | | | |
| | No | Debtor 2 live in os. Debtor 2 m | | parate household | | s for Separate House | ehold o | f Debtor | 2. | |
| 2. | Do you have dep | endents? | | No | | Dependent's relat | ionshi | p to | Dependent's | Does dependent |
| | Do not list Debtor Debtor 2. | 1 and | | Yes. Fill out this ir for each depender | | Bairtan Alan Bahta | | | age | live with you? |
| | Do not state the d | lependents' | | | | | | | | Yes No Yes |
| | | | | | | | | | | □ No - □ Yes |
| | | | | | | | | | | □ No - □ Yes |
| | | | | | | | | | | □ No |
| | | | | | | | | | | Yes |
| 3. | Do your expense expenses of peo yourself and you | ple other than | | ✓ No ☐ Yes | | | | | | |
| P | Part 2: Estim | ate Your Oı | ngoir | ng Monthly Exp | oenses | | | | | |
| to ı | | s of a date afte | er the | | | re using this form a supplemental Sch | | | | |
| | lude expenses pai ch assistance and | | | | | ı know the value of cial Form 106I.) | | | Your expens | ses |
| 4. | | | | nses for your resionly rent for the grou | | | | • | 4 | |
| | If not included in | line 4: | | | | | | | | |
| | 4a. Real estate t | taxes | | | | | | 4 | 4a | |
| | 4b. Property, hor | meowner's, or | renter's | s insurance | | | | 4 | 4b | |
| | 4c. Home mainte | enance, repair, | and u | pkeep expenses | | | | 4 | 4c | |
| | 4d. Homeowner' | s association o | r conc | dominium dues | | | | • | 4d | |

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| Deb | tor 1 Damian Lopez | Case number (if known) | |
|-----|---|------------------------|----------|
| | | Your expenses | |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | |
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. | |
| | 6b. Water, sewer, garbage collection | 6b | |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$45.00 |
| | 6d. Other. Specify: | 6d | |
| 7. | Food and housekeeping supplies | 7. | \$200.00 |
| 8. | Childcare and children's education costs | 8. | |
| 9. | Clothing, laundry, and dry cleaning | 9. | |
| 10. | Personal care products and services | 10. | |
| 11. | Medical and dental expenses | 11. | \$0.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$100.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | |
| 14. | Charitable contributions and religious donations | 14. | |
| 15. | Insurance. | | |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a | |
| | 15b. Health insurance | 15b | \$117.00 |
| | 15c. Vehicle insurance | 15c | \$168.00 |
| 40 | 15d. Other insurance. Specify: | 15d | |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a | \$426.00 |
| | 17b. Car payments for Vehicle 2 | 17b | |
| | 17c. Other. Specify: | 17c | |
| | 17d. Other. Specify: | 17d | |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19. | Other payments you make to support others who do not live with you. Specify: | 19. | |

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| Deb | tor 1 | Damian Lopez | Case number (if known) | |
|-----|-------|--|------------------------|------------|
| 20. | | real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a | |
| | 20b. | Real estate taxes | 20b. | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d | |
| | 20e. | Homeowner's association or condominium dues | 20e | |
| 21. | Other | . Specify: | 21. + | |
| 22. | Calcu | late your monthly expenses. | | |
| | 22a. | Add lines 4 through 21. | 22a | \$1,056.00 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c | \$1,056.00 |
| 23. | Calcu | late your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a | \$1,059.41 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. _ | \$1,056.00 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c | \$3.41 |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after you | file this form? | |
| | | cample, do you expect to finish paying for your car loan within the year or do you exent to increase or decrease because of a modification to the terms of your mortgage | . , | |
| | | No. Yes. Explain here: None. | | |

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| Fill in this in | formation to i | dentify your case | : | | |
|--------------------|--------------------|---------------------------|--------------------|----------|-----------------------|
| Debtor 1 | Damian | | Lopez | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing |) First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court fo | or the: NORTHERN D | ISTRICT OF ILLINOI | <u>s</u> | |
| Case number | | | | | ☐ Check if this is an |
| (if known) | | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying

| | | Your assets Value of what you own |
|----|--|--------------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) | |
| | 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$4,192.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$4,192.00 |
| Đ | | |
| | art 2: Summarize Your Liabilities | |
| | art 2: Summarize Your Liabilities | Your liabilities Amount you owe |
| | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | Amount you owe |
| | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | Amount you owe \$22,888.00 |

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| Deb | otor 1 | Damian Lopez Case | e number (if known) | |
|-----|--------------|---|--|------------|
| P | art 3: | Summarize Your Income and Expenses | | |
| 4. | | lule I: Your Income (Official Form 106I) your combined monthly income from line 12 of Schedule I | | \$1,059.41 |
| 5. | | lule J: Your Expenses (Official Form 106J) your monthly expenses from line 22c of Schedule J | | \$1,056.00 |
| P | art 4: | Answer These Questions for Administrative and Statistical F | Records | |
| 6. | Are yo | ou filing for bankruptcy under Chapters 7, 11, or 13? | | |
| | _ | lo. You have nothing to report on this part of the form. Check this box and submit | this form to the court with your other sch | edules. |
| 7. | What I | kind of debt do you have? | | |
| | fa | our debts are primarily consumer debts. Consumer debts are those "incurred barnily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical four debts are not primarily consumer debts. You have nothing to report on this his form to the court with your other schedules. | purposes. 28 U.S.C. § 159. | bmit |
| 8. | | the Statement of Your Current Monthly Income: Copy your total current monthly I Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | y income from | \$511.34 |
| 9. | Сору | the following special categories of claims from Part 4, line 6 of Schedule E/F: | : | |
| | | | Total claim | |
| | From | Part 4 on <i>Schedule E/F,</i> copy the following: | | |
| | 9a. D | omestic support obligations. (Copy line 6a.) | \$0.00 | |
| | 9b. T | axes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 | |
| | 9c. C | claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 | |
| | 9d. S | tudent loans. (Copy line 6f.) | \$0.00 | |
| | | Obligations arising out of a separation agreement or divorce that you did not report riority claims. (Copy line 6g.) | as \$0.00 | |
| | 9f. D | ebts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$0.00 | |
| | 9g. T | otal. Add lines 9a through 9f. | \$0.00 | |

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| Fill in this inf | ormation to i | dentify your case | : | |
|-------------------------------|-------------------|---------------------------|--------------------------------|---|
| Debtor 1 | <u>Damian</u> | | Lopez | _ |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | F:N | A | - AN | _ |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court fo | or the: NORTHERN D | ISTRICT OF ILLINOIS | _ |
| Case number | | | | ☐ Check if this is an |
| (if known) | | | | amended filing |
| Official Farms | 100Daa | | | _ |
| Official Form | | | | |
| Declaration | About an I | ndividual Debt | or's Schedules | 12/15 |
| Sig | ın Below | | | |
| Did you pay | or agree to pay | someone who is NOT | an attorney to help you fill c | out bankruptcy forms? |
| √ No | | | | |
| ☐ Yes. Na | ame of person | | | Attach Bankruptcy Petition Preparer's Notice, |
| ш | _ | | | Declaration, and Signature (Official Form 119). |
| | | | | |
| | | | | |
| | | | | |
| Under penalt true and corr | | eclare that I have read | the summary and schedule | s filed with this declaration and that they are |
| X /s/ Damia | an Lopez | | X | |

Damian Lopez, Debtor 1

MM / DD / YYYY

Date

Signature of Debtor 2

MM / DD / YYYY

Date

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| Deb | | | | | | |
|-------------|--|---|--------------------|-------------------------------|---|--|
| | tor 1 | Damian First Name | Middle Name | Lopez Last Name | | |
| Deb | tor 2 | | | | | |
| (Spo | ouse, if filing) | First Name | Middle Name | Last Name | | |
| Unit | ed States Ba | nkruptcy Court fo | r the: NORTHE | RN DISTRICT OF II | LLINOIS | |
| | e number | | | | | eck if this is an |
| (if kı | nown) | | | | | ended filing |
| Offic | cial Form | 107 | | | | |
| | | | Affairs for | Individuals F | iling for Bankruptcy | 04/16 |
| | | ······································· | 7 11 14 11 5 10 1 | individudio i | g :0: 2aapto) | 0.7.10 |
| | | ve Details Abo | | tal Status and W | here You Lived Before | |
| i | Not marrie | ed | | | | |
| _ | □ No | | | ere other than where | e you live now? | |
| Ī | | • | , | | | |
| Ī | Debtor 1: | | | Dates Debtor 1 | Debtor 2: | Dates Debtor 2 |
| [| Debtor 1: | | | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
| ſ | Debtor 1: | | | | Debtor 2: | lived there |
| Ē | | th Augusta Dri | ive | | | lived there |
| Ī | 2613 Nor | th Augusta Dri Street | ive | lived there | | lived there Same as Debtor From |
| [| 2613 Nor | | ive | lived there | Same as Debtor 1 | lived there Same as Debtor |
| [| 2613 Nor | Street | ive 60083 | lived there | Same as Debtor 1 | lived there Same as Debtor From |
| | 2613 Nor | rth IL | 60083 | lived there | Same as Debtor 1 | lived there Same as Debt From |
| 3. V | 2613 Nor Number S Wadswore City | rth IL Sta | 60083 ate ZIP Code | From To a spouse or legal eq | Same as Debtor 1 Number Street City State ZIP Coo | lived there Same as Debtor From To de |
| 3. \ | 2613 Nor Number S Wadswor City Within the last | rth IL Sta | 60083 ate ZIP Code | From To a spouse or legal eq | Same as Debtor 1 Number Street City State ZIP Cod | lived there Same as Debtor From To de or territory? |

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| Deb | otor 1 | Damian Lopez | Case number (if known) | | | | | | |
|-----|-------------------|--|--|--|--|--|--|--|--|
| P | art 2: | Explain the Sources of | our Income | | | | | | |
| 4. | Fill in th | a have any income from employs the total amount of income you rece to filing a joint case and you have the fill in the details. | eived from all jobs and all bus | inesses, including par | t-time activities. | endar years? | | | |
| | | | Debtor 1 | | Debtor 2 | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions | | | |
| | | ry 1 of the current year until u filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$1,534.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | | | |
| | | calendar year: December 31, | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$41,254.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | | | |
| | | ndar year before that: December 31, | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$11,507.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | | | |
| 5. | Include unempl | a receive any other income during income regardless of whether that oyment; and other public benefit publing and lottery winnings. If you 1. | t income is taxable. Example ayments; pensions; rental inc | es of other income are come; interest; dividen | ds; money collected from law | suits; royalties; | | | |
| | List eac | ch source and the gross income fro | om each source separately. [| Do not include income | that you listed in line 4. | | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | | | |

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| Deb | otor 1 | Damian Lopez Case number (if known) |
|-----|----------------------------------|--|
| Р | art 3: | List Certain Payments You Made Before You Filed for Bankruptcy |
| 6. | Are eith | ner Debtor 1's or Debtor 2's debts primarily consumer debts? |
| | □ No. | Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? |
| | | ☐ No. Go to line 7. |
| | | Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. |
| | | * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. |
| | Yes | s. Debtor 1 or Debtor 2 or both have primarily consumer debts. |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? |
| | | ✓ No. Go to line 7. |
| | | Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. |
| 7. | Insiders corpora agent, in | 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; tions of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations a child support and alimony. |
| | ☑ No | s. List all payments to an insider. |
| 8. | | 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that ed an insider? |
| | Include | payments on debts guaranteed or cosigned by an insider. |
| | ☑ No ☐ Yes | s. List all payments that benefited an insider. |

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| Deb | tor 1 | Damian Lopez | | | Case number | (if known) _ | | | |
|------|-------------|--|--------------------|--|----------------------------|----------------|---------------|----------|--------------|
| P | art 4: | Identify Legal Acti | ons, Reposse | essions, and Forec | osures | | | | |
| 9. | List all | 1 year before you filed for such matters, including pe ations, and contract disput | rsonal injury case | | | | - | _ | |
| | □ No ✓ Yes | s. Fill in the details. | | | | | | | |
| Cas | e title | | Nature of the c | ase | Court or agency | | s | Status | of the case |
| Edv | ward Ro | ose Associates, LLC | Eviction | | Wisconsin Circ | uit Court | | | Pending |
| vs. | Damiar | n Lopez | | | Court Name 912 56th St. | | | Ľ | V r criding |
| | | | | | Number Street | | | — [| ☐ On appeal |
| Cas | e numbe | er 2017SC000160 | | | | | | [| ☐ Concluded |
| | | | | | Kenosha | WI | 53140 | | |
| | | | | | City | State | ZIP Code | | |
| Ray | _ | s. Fill in the information be | elow. | Describe the property 2014 Kia Optima | | Date 07/2 | | | the property |
| | litor's Nam | | | Acct #5595 | | | | Ψι¬ | ,,000.00 |
| | | waukee Avenue | | | | | | | |
| Num | ber Str | reet | | Explain what happene | | | | | |
| | | | | ✓ Property was repos ✓ Property was forecl | | | | | |
| Ver | non Hil | lls IL | | Property was garnis | | | | | |
| City | | State | ZIP Code | | ed, seized, or levied. | | | | |
| 11. | | 90 days before you filed ts from your accounts or | | | - | al institutior | າ, set off an | у | |
| | ✓ No | s. Fill in the details. | | | | | | | |
| 12. | | 1 year before you filed force, a court-appointed rec | | | in the possession o | f an assigne | e for the be | enefit o | of |
| | ✓ No | | | | | | | | |

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| Deb | otor 1 | Damian Lopez | Case number (if known) |
|-----|----------------------|---|--|
| P | art 5: | List Certain Gifts and Contributions | |
| 13. | Within 2 | 2 years before you filed for bankruptcy, did you give any gifts with a tot | al value of more than \$600 per person? |
| | ✓ No ☐ Yes | . Fill in the details for each gift. | |
| 14. | Within 2 to any o | ? years before you filed for bankruptcy, did you give any gifts or contrik harity? | outions with a total value of more than \$600 |
| | ✓ No ☐ Yes | . Fill in the details for each gift or contribution. | |
| P | art 6: | List Certain Losses | |
| 15. | | year before you filed for bankruptcy or since you filed for bankruptcy, saster, or gambling? | did you lose anything because of theft, fire, |
| | ✓ No ☐ Yes | . Fill in the details. | |
| P | art 7: | List Certain Payments or Transfers | |
| 16. | | year before you filed for bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy pe | |
| | - | any attorneys, bankruptcy petition preparers, or credit counseling agencies | |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 17. | | year before you filed for bankruptcy, did you or anyone else acting on who promised to help you deal with your creditors or to make paymen | |
| | Do not i | nclude any payment or transfer that you listed on line 16. | |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 18. | | 2 years before you filed for bankruptcy, did you sell, trade, or otherwise y transferred in the ordinary course of your business or financial affairs | |
| | | both outright transfers and transfers made as security (such as granting of an another security is statement. | a security interest or mortgage on your property). |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 19. | | 10 years before you filed for bankruptcy, did you transfer any property a beneficiary? (These are often called asset-protection devices.) | to a self-settled trust or similar device of which |
| | ✓ No | . Fill in the details. | |
| | | | |

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| Del | otor 1 | Damian Lopez | Case number (if known) |
|-----|-----------------|---|---|
| P | art 8: | List Certain Financial Accounts, Instruments, Safe Depo | osit Boxes, and Storage Units |
| 20. | | 1 year before you filed for bankruptcy, were any financial accounts or inclosed, sold, moved, or transferred? | nstruments held in your name, or for your |
| | Include | checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions. | of deposit; shares in banks, credit unions, brokerage |
| | ✓ No ☐ Yes | s. Fill in the details. | |
| 21. | | now have, or did you have within 1 year before you filed for bankruptc urities, cash, or other valuables? | y, any safe deposit box or other depository |
| | ✓ No ☐ Yes | s. Fill in the details. | |
| 22. | Have yo | ou stored property in a storage unit or place other than your home with | in 1 year before you filed for bankruptcy? |
| | | s. Fill in the details. | |
| P | art 9: | Identify Property You Hold or Control for Someone Else | |
| 23. | - | hold or control any property that someone else owns? Include any proin trust for someone. | operty you borrowed from, are storing for, |
| | ✓ No ☐ Yes | s. Fill in the details. | |
| Р | art 10: | Give Details About Environmental Information | |
| For | the purp | oose of Part 10, the following definitions apply: | |
| | hazardou | nental law means any federal, state, or local statute or regulation conce us or toxic substance, wastes, or material into the air, land, soil, surface g statutes or regulations controlling the cleanup of these substances, w | e water, groundwater, or other medium, |
| | | ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites. | al law, whether you now own, operate, or |
| | | us material means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item. | ous waste, hazardous substance, toxic |
| Rej | oort all ne | otices, releases, and proceedings that you know about, regardless of w | hen they occurred. |
| 24. | Has any law? | y governmental unit notified you that you may be liable or potentially lia | able under or in violation of an environmental |
| | ✓ No ☐ Yes | s. Fill in the details. | |

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| Deb | tor 1 | Damian Lopez | Case number (if known) | | | | | |
|---------------------|---|---|--|--|--|--|--|--|
| 25. | - | ou notified any governmental unit of any rele | | | | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | | |
| 26. | Have you | | tive proceeding under any environmental law? Include settlements and | | | | | |
| | ☑ No | s. Fill in the details. | | | | | | |
| P | art 11: | Give Details About Your Business | or Connections to Any Business | | | | | |
| 27. | Within busines | | you own a business or have any of the following connections to any | | | | | |
| | | A member of a limited liability company (LLC | | | | | | |
| | | An owner of at least 5% of the voting or equit | | | | | | |
| | ست | None of the above applies. Go to Part 12. S. Check all that apply above and fill in the deta | ails below for each business. | | | | | |
| 28. | | 2 years before you filed for bankruptcy, did ncial institutions, creditors, or other parties. | you give a financial statement to anyone about your business? Include | | | | | |
| | □ No □ Yes | s. Fill in the details below. | | | | | | |
| P | art 12: | Sign Below | | | | | | |
| that pro or b | have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury hat answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | | | |
| | | Lopez, Debtor 1 | Signature of Debtor 2 | | | | | |
| I | Date | | Date | | | | | |
| Did | you atta | ch additional pages to Your Statement of Fil | nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | | | | | |
| | No Yes | | | | | | | |
| Did | you pay | or agree to pay someone who is not an atto | rney to help you fill out bankruptcy forms? | | | | | |
| | | me of person | Attach the Bankruptcy Petition Preparer's Notice, | | | | | |
| | | | Declaration, and Signature (Official Form 119). | | | | | |

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| Fill in this inf | Fill in this information to identify your case: | | | | | | |
|---|---|-------------|-----------|--|--|--|--|
| Debtor 1 | Damian First Name | Middle Nome | Lopez | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | | | | | |
| Case number | | | | | | | |
| (if known) | | | | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below. | | | | | | | |
|----|---|---|---|--|-------|---|--|--|
| | Identify the creditor and the property that is collateral | | What do you intend to do with the property that secures a debt? | | | Did you claim the property as exempt on Schedule C? | | |
| | Creditor's name: | Bridgecrest | | Surrender the property. Retain the property and redeem it. | | No Yes | | |
| | Description of property securing debt: | 2010 Nissan Altima (approx. 110000 miles) | | Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | _ | | | |
| | Creditor's name: | Franklin Financial | | Surrender the property. Retain the property and redeem it. | | No Yes | | |
| | Description of property securing debt: | 2000 Lexus GS300 130K Miles | ☑ | Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Debt will be reaffirmed for fair m | narke | t value. | | |

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| Debtor 1 | Damian Lopez | | Case number (if known) |
|-------------|---|---|--|
| Part 2 | List Your Unexpired | Personal Property Leases | |
| fill in the | information below. Do not list | real estate leases. Unexpired leases ar | tory Contracts and Unexpired Leases (Official Form 106G), e leases that are still in effect; the lease period has not e does not assume it. 11 U.S.C. § 365(p)(2). |
| Des | cribe your unexpired personal p | property leases | Will this lease be assumed? |
| Non | e. | | |
| Part 3 | : Sign Below | | |
| | penalty of perjury, I declare th nal property that is subject to a | • | ny property of my estate that secures a debt and |
| X /s/ Da | ımian Lopez | x | |
| Damia | ın Lopez, Debtor 1 | Signature of Debtor 2 | |
| Date | | Date | _ |
| | MM / DD / YYYY | MM / DD / YYYY | |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

| In | re Damian Lopez | Case No. | |
|---|---|------------------------------|---------------------------------|
| | | Chapter | 7 |
| | DISCLOSURE OF COMPENSATION OF | F ATTORNEY FOR | R DEBTOR |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in cor is as follows: | petition in bankruptcy, or | agreed to be paid to me, for |
| | For legal services, I have agreed to accept | | \$0.00 |
| | Prior to the filing of this statement I have received | | \$0.00 |
| | Balance Due | | \$0.00 |
| 2. | The source of the compensation paid to me was: ☐ Debtor ☐ Other (specify) | | |
| 3. | The source of compensation to be paid to me is: | | |
| | ✓ Debtor | | |
| 4. | I have not agreed to share the above-disclosed compensation was associates of my law firm. | vith any other person unle | ess they are members and |
| I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal s | ervice for all aspects of th | ne bankruptcy case, including: |
| | a. Analysis of the debtor's financial situation, and rendering advice to bankruptcy; | o the debtor in determinin | g whether to file a petition in |
| | b. Preparation and filing of any petition, schedules, statements of aff | fairs and plan which may | be required; |
| | c. Representation of the debtor at the meeting of creditors and confi | rmation hearing, and any | adjourned hearings thereof: |

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| Danan | (Earm | 2020) | | (10/15) | ۱ |
|---------|-------|-------|----|---------|---|
| B2030 (| (Form | 2030) | ١(| 12/15 |) |

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

| I certify that the foregoing is a complete representation of the debtor(s) in this ban | CERTIFICATION e statement of any agreement or arrangement fi kruptcy proceeding. | or payment to me for |
|--|---|----------------------|
| | Is/ Michelle Santos Michelle Santos Michelle Santos, Esq. 4949 Grand Avenue, Suite 6A Gurnee, IL 60031 Phone: (312) 952-2681 | Bar No. 6297527 |

/s/ Damian Lopez

Damian Lopez

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Damian Lopez CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

| | The above named De | btor hereby verifies | that the attached | d list of credito | rs is true and | correct to the | best of his/her |
|------|--------------------|----------------------|-------------------|-------------------|----------------|----------------|-----------------|
| know | rledge. | | | | | | |

| Date | Signature // Damian Lopez Damian Lopez |
|------|---|
| Date | Signature |

ACS Inc-Education Servicing PO Box 7060 Utica, NY 13504

American First Finance 3515 N. Ridge Road, #200 Wichita, KS 67205

Barclays Bank Delaware 125 S. West Street Wilmington, DE 19801

Baxter Credit Union 340 N. Milwaukee Ave. Vernon Hills, IL 60061

Best Buy PO Box 6497 Sioux Falls, SD 57117

BMO Harris Bank 3800 Golf Road Rolling Meadows, IL 60008

Bridgecrest PO Box 29018 Phoenix, AZ 85038

Capital One Bank USA NA PO Box 30281 Salt Lake City, UT 84130

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Chase Bank Attention: Bankruptcy Department PO Box 15298 Wilmington, DE 19850

Citibank NA PO Box 20507 Kansas City, MO 64195

CitiBank NA 701 E. 60th Street North Sioux Falls, SD 57117

Credit Collection Service PO Box 607 Norwood, MA 02062

Credit One Bank PO Box 98872 Las Vegas, NV 89193

DSNB/Macys PO Box 8218 Mason, OH 45050

Edward Rose & Sons Development 38525 Woodward Ave.
PO Box 2011
Bloomfield Hills, MI 48303

Enhanced Recovery Company PO Box 57547 Jacksonville, FL 32241

Fedloan Servicing PO Box 60610 Harrisburg, PA 17106

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Franklin Financial
Dealer Financial System
Michael Collection Dept
6001 W. Capitol Drive, Ste 205
Milwaukee, WI 53216

GC Services 6330 Gulfton Street Houston, TX 77081

LVNV Funding LLC c/o Resurgent Capital Services PO BOX 10497 MS 576 Greenville, SC 29603

Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108

Nationwide Headquarters PO Box 607 Norwood, MA 02062

Security Finance Corporation PO Box 3146 Spartanburg, SC 29304

Sprint PO Box 4191 Carol Stream, IL 60197

Sprint 6391 Sprint Parkway Overland Park, KS 66251

SYNCB/PaypalSmartConn PO Box 965005 Orlando, FL 32896

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SYNCB/Walmart PO Box 965024 Orlando, FL 32896

Verizon Wireless 500 Technology Drive, Suite 550 Weldon Spring, MO 63304

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Damian Lopez CASE NO.

CHAPTER 7

CERTIFICATE OF SERVICE

I, the undersigned, hereby certify that on August 11, 2017, a copy of the attached Chapter 13 Plan, with any attachments, was served on each party in interest listed below, by placing each copy in an envelope properly addressed, postage fully prepaid in compliance with Local Rules.

Date: /s/ Michelle Santos

Michelle Santos

Attorney for the Debtor(s)

Baxter Credit Union Capital One Bank USA NA

5595 3263

340 N. Milwaukee Ave. PO Box 30281

Vernon Hills, IL 60061 Salt Lake City, UT 84130

ACS Inc-Education Servicing Best Buy Chase Bank

9095 0814 Attention: Bankruptcy Department

PO Box 7060 PO Box 6497 PO Box 15298

Utica, NY 13504 Sioux Falls, SD 57117 Wilmington, DE 19850

American First Finance BMO Harris Bank Citibank NA

1380 3800 Golf Road 7127

3515 N. Ridge Road, #200 Rolling Meadows, IL 60008 PO Box 20507 Wichita, KS 67205 Kansas City, MO 64195

Barclavs Bank Delaware Bridgecrest CitiBank NA

Barclays Bank Delaware Bridgecrest CitiBank 8787 8801 2179

125 S. West Street PO Box 29018 701 E. 60th Street

Wilmington, DE 19801 Phoenix, AZ 85038 North Sioux Falls, SD 57117

Baxter Credit Union Capital One Bank USA NA Credit Collection Service

0058 3256 5889

340 N. Milwaukee Ave. PO Box 30281 PO Box 607

Vernon Hills, IL 60061 Salt Lake City, UT 84130 Norwood, MA 02062

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS **EASTERN DIVISION (CHICAGO)**

Damian Lopez IN RE: CASE NO.

CHAPTER

CERTIFICATE OF SERVICE

(Continuation Sheet #1)

Credit One Bank 6110

PO Box 98872 Las Vegas, NV 89193

6001 W. Capitol Drive, Ste 205 Milwaukee, WI 53216

3044

6110

GC Services

6330 Gulfton Street

Houston, TX 77081

LVNV Funding LLC

Franklin Financial

Dealer Finaancial System

Michael Collection Dept

Damian Lopez 39243 N. Queensbury Lane

Beach Park, IL 60083

DSNB/Macys 1664

PO Box 8218 Mason, OH 45050

Edward Rose & Sons Development

xxxxxx xopez 38525 Woodward Ave.

PO Box 2011

Bloomfield Hills, MI 48303

Midland Funding LLC

Greenville, SC 29603

PO BOX 10497 MS 576

7127

2365 Northside Drive, Suite 300

c/o Resurgent Capital Services

San Diego, CA 92108

Enhanced Recovery Company

4904

PO Box 57547

Jacksonville, FL 32241

Nationwide Headquarters

5889

PO Box 607

Norwood, MA 02062

500 Technology Drive, Suite 550 Weldon Spring, MO 63304

Security Finance Corporation Fedloan Servicing

7FD0

PO Box 60610

Harrisburg, PA 17106

1153

PO Box 3146

Spartanburg, SC 29304

Sprint

PO Box 4191

Sprint 6391 Sprint Parkway Overland Park, KS 66251

Carol Stream, IL 60197

SYNCB/PaypalSmartConn

4177

PO Box 965005 Orlando, FL 32896

SYNCB/Walmart

8075

PO Box 965024 Orlando, FL 32896

Verizon Wireless